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| FORM PTO-1390 (REV 1-98) | | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | ATTORNEY'S DOCKET NUMBER 81864.0053 |
| TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371 | | | U.S. APPLICATION NUMBER (if known, see 37 C.F.R. 1.5) 10,526,427 Not Assigned |
| INTERNATIONAL APPLICATION NO. PCT/JP03/09735 | INTERNATIONAL FILING DATE July 21, 2003 | PRIORITY DATE CLAIMED September 26, 2002 | |
| TITLE OF INVENTION FERRITE MATERIAL | | | |
| APPLICANT(S) FOR DO/EO/US Kenya TAKAGAWA AND Eiichiro FUKUCHI, both of Tokyo, JAPAN | | | |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information: | | | |
| <p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(1).</p> <p>4. <input type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2))</p> <p>a. <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau).</p> <p>b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau.</p> <p>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</p> <p>6. <input checked="" type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)).</p> <p>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))</p> <p>a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau).</p> <p>b. <input type="checkbox"/> have been transmitted by the International Bureau.</p> <p>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</p> <p>d. <input type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).</p> <p>10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p> | | | |
| Items 11. to 16. below concern document(s) or information included: | | | |
| <p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 C.F.R. 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 C.F.R. 3.28 and 3.31 is included.</p> <p>13. <input type="checkbox"/> A FIRST preliminary amendment.</p> <p><input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.</p> <p>14. <input type="checkbox"/> A substitute specification.</p> <p>15. <input type="checkbox"/> A change of power of attorney and/or address letter.</p> <p>16. <input type="checkbox"/> Other items or information:</p> | | | |

Transmittal Letter to the United States Designated Office (DO/US)—Entry Into National Stage under 35 U.S.C. 371—PTO 1390 [13-7]

| U.S. APPLICATION NO. (if known, see 37 C.F.R. 1.5) 10/526427 | | INTERNATIONAL APPLICATION NUMBER PCT/JP03/09735 | | ATTORNEY'S DOCKET NUMBER 81864.0053 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------|--|---|--|--|--------------|----------------|--------------|------|--|--------------|----|----|----|-----------|------------|--------------------|---|---|---|------------|-----------|---|--|--|--|------------|-----------|--|--|--|-------------------------------------|------------|--------|--------------------------------------|--|--|--|--|-------------------|---|--|--|--|--|--------|-------------------|--|--|--|--|---------------|--|--|--|--|--|------|-----------------------------|--|--|--|--|----------------|--|--|--|--|--|------|------------------------------|--|--|--|--|-------------------|----|--|--|--|--|----------------------|----|---------------------|--|---|--|--|--|--|--|---|--|--|---|--|--|
| 17. <input checked="" type="checkbox"/> The following fees are submitted: BASIC NATIONAL FEE (37 C.F.R. 1.492(a)(1)-(5)): Basic National Fee\$300 National Stage Search Fee\$500 National Stage Examination Fee\$200 <div style="text-align: right;">TOTAL FEE AMOUNT =</div> | | | | | CALCULATIONS PTO USE ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surcharge of \$130.00 for furnishing the oath or declaration later than <input checked="" type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 C.F.R. 1.492(e)). | | | | | \$ 1000.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">CLAIMS</th> <th style="width: 15%;">NUMBER FILED</th> <th style="width: 15%;">NUMBER ALLOWED</th> <th style="width: 15%;">NUMBER EXTRA</th> <th style="width: 15%;">RATE</th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td style="text-align: center;">47</td> <td style="text-align: center;">20</td> <td style="text-align: center;">27</td> <td>X \$50.00</td> <td style="text-align: right;">\$ 1350.00</td> </tr> <tr> <td>Independent claims</td> <td style="text-align: center;">4</td> <td style="text-align: center;">3</td> <td style="text-align: center;">1</td> <td>X \$200.00</td> <td style="text-align: right;">\$ 200.00</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>X \$360.00</td> <td style="text-align: right;">\$ 360.00</td> </tr> <tr> <td colspan="3">SIZE FEE <u>71</u> (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)</td> <td>\$250 for each additional 50 sheets</td> <td>X \$250.00</td> <td style="text-align: right;">\$ 200</td> </tr> <tr> <td colspan="5" style="text-align: center;">TOTAL OF ABOVE CALCULATIONS =</td> <td style="text-align: right;">\$ 3040.00</td> </tr> <tr> <td colspan="5"> <input type="checkbox"/> Applicant claims small entity status. See 37 C.F.R. § 1.27. The fees indicated above are reduced by 1/2. </td> <td style="text-align: right;">\$ 150</td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL =</td> <td style="text-align: right;">\$ 300</td> </tr> <tr> <td colspan="5"> Processing fee of \$130.00 for furnishing the English translation later than <input checked="" type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 C.F.R. 1.492(f)). </td> <td style="text-align: right;">\$ 0</td> </tr> <tr> <td colspan="5" style="text-align: right;">TOTAL NATIONAL FEE =</td> <td style="text-align: right;">\$ 3040</td> </tr> <tr> <td colspan="5"> Fee for recording the enclosed assignment (37 C.F.R. 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. 3.28, 3.31). \$40.00 per property + </td> <td style="text-align: right;">\$ 0</td> </tr> <tr> <td colspan="5" style="text-align: right;">TOTAL FEES ENCLOSED =</td> <td style="text-align: right;">\$ 3040.00</td> </tr> <tr> <td colspan="5" rowspan="2" style="vertical-align: bottom;">\$</td> <td style="text-align: right;">Amt. Refunded</td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: right;">Amt. charged</td> <td></td> </tr> <tr> <td colspan="6"> a. <input type="checkbox"/> Checks in the amounts of \$[amt.] and \$[amt.] to cover the above fees are enclosed. b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 50-1314 in the amount of <u>\$3040.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-1314. A duplicate copy of this sheet is enclosed. NOTE: Where an appropriate time limit under 37 C.F.R. 1.494 or 1.495 has not been met, a petition to revive (37 C.F.R. 1.137(a) or (b)) must be filed and granted to restore the application to pending status. SEND ALL CORRESPONDENCE TO: <input checked="" type="checkbox"/> Customer Number 000026021 → </td> </tr> <tr> <td colspan="3"> HOGAN & HARTSON L.L.P. 500 South Grand Avenue, Suite 1900 Los Angeles, California 90071 Phone: 213-337-6700 Fax: 213-337-6701 </td> <td colspan="3" style="text-align: center;">  SIGNATURE Dariush G. Adli REG.NO. 51,386 Express Mail Label No. EV 507 671 888 US Date: February 28, 2005 </td> </tr> </tbody></table> | | | | | CLAIMS | NUMBER FILED | NUMBER ALLOWED | NUMBER EXTRA | RATE | | Total claims | 47 | 20 | 27 | X \$50.00 | \$ 1350.00 | Independent claims | 4 | 3 | 1 | X \$200.00 | \$ 200.00 | MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | | X \$360.00 | \$ 360.00 | SIZE FEE <u>71</u> (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) | | | \$250 for each additional 50 sheets | X \$250.00 | \$ 200 | TOTAL OF ABOVE CALCULATIONS = | | | | | \$ 3040.00 | <input type="checkbox"/> Applicant claims small entity status. See 37 C.F.R. § 1.27. The fees indicated above are reduced by 1/2. | | | | | \$ 150 | SUBTOTAL = | | | | | \$ 300 | Processing fee of \$130.00 for furnishing the English translation later than <input checked="" type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 C.F.R. 1.492(f)). | | | | | \$ 0 | TOTAL NATIONAL FEE = | | | | | \$ 3040 | Fee for recording the enclosed assignment (37 C.F.R. 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 C.F.R. 3.28, 3.31). \$40.00 per property + | | | | | \$ 0 | TOTAL FEES ENCLOSED = | | | | | \$ 3040.00 | \$ | | | | | Amt. Refunded | \$ | Amt. charged | | a. <input type="checkbox"/> Checks in the amounts of \$[amt.] and \$[amt.] to cover the above fees are enclosed. b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. 50-1314 in the amount of <u>\$3040.00</u> to cover the above fees. 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| CLAIMS | NUMBER FILED | NUMBER ALLOWED | NUMBER EXTRA | RATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total claims | 47 | 20 | 27 | X \$50.00 | \$ 1350.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent claims | 4 | 3 | 1 | X \$200.00 | \$ 200.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable) | | | | X \$360.00 | \$ 360.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| SUBTOTAL = | | | | | \$ 300 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| \$ | | | | | Amt. Refunded | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | Amt. charged | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Transmittal Letter to the United States Designated Office (DO/US)—Entry Into National Stage under 35 U.S.C. 371—PTO 1390 [13-7]

10/526427

DT06 PCT/PTO 28 FEB 2005

PATENT

Attorney Docket No: 81864.0053

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Kenya TAKAGAWA, et al.

Serial No: Not Assigned

Filed: February 28, 2005

For: FERRITE MATERIAL

Art Unit: Not Assigned

Examiner: Not Assigned

CERTIFICATE OF MAILING VIA U.S. EXPRESS MAIL

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Date of Deposit: February 28, 2005

Mail Stop

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

I hereby certify that

- ☒ two copies of a letter of transmittal
- ☒ authorization to charge the Deposit account the amount of \$ 3040.00 as filing fee
- ☒ patent application (52 page(s) of specification; 47 claim(s); 1 page(s) of abstract
- ☒ 18 sheet(s) of formal drawings
- ☒ Information Disclosure Statement with 4 references
- ☒ return postcard

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service with sufficient postage under 37 C.F.R. § 1.10 on the date indicated above and are addressed to:

Mail Stop

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Date: February 28, 2005

Hogan & Hartson, LLP
500 South Grand Avenue, Suite 1900
Los Angeles, California 90071
Telephone: 213-337-6700
Facsimile: 213-337-6701

Christopher Bostrom

Name of person mailing papers

Christopher Bostrom

Signature